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NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 9/ 579383

Total Fee Calculation

	Fee Code	Total # Claims	Number Exam	X	Fee	Fee	-	Total
	Sm. Lg.				Sm. Entry	Lg. Entry		
Basic Filing Fee	201.101					<u>690</u>	-	<u>690</u>
Total Claims > 30	201.101	<u>45</u>	-	<u>25</u>	X	<u>450</u>	-	<u>450</u>
Independent Claims > 3	202.102	<u>10</u>	-	<u>7</u>	X	<u>546</u>	-	<u>546</u>
Multi-Dep Claim Present	204.104						-	
Surcharge	205.105					<u>130</u>	-	<u>130</u>
English Translation	139							

TOTAL FEE CALCULATION

1816

Fees due upon filing the application

Total Filing Fees Due = \$ 1816.00

Less Filing Fees Submitted = \$ ✓

BALANCE DUE = \$ 1816.00

J. Antis
Office of Initial Patent Examination

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	45 minus 20 = *	25
INDEPENDENT CLAIMS	10 minus 3 = *	7
MULTIPLE DEPENDENT CLAIM PRESENT		

SMALL ENTITY TYPE ☐

OR

OTHER THAN SMALL ENTITY

RATE	FEE
	345.00
X\$ 9=	
X39=	
+130=	
TOTAL	

OR

OR

OR

OR

OR

RATE	FEE
	690.00
X\$18=	450
X78=	546
+260=	
TOTAL	1686

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
	Independent	*	Minus	***
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

SMALL ENTITY

OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
	Independent	*	Minus	***
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
	Ind pendent	*	Minus	***
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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